

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>7/6/05</u>		2 Serial/Patent # <u>10/027,502</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time	9	1/21/05	\$ 1,020.00							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 1,020.00							
10 REASON:		8 TO BE REFUNDED BY:									
	Overpayment	<input type="checkbox"/> Treasury Check									
	Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>1</td><td>3</td><td>--</td><td>2</td><td>1</td><td>6</td><td>6</td></tr></table>			1	3	--	2	1	6	6
1	3	--	2	1	6	6					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<div style="font-family: cursive; font-size: 1.2em;">Can't buy EOT once app is beyond extendable period for reply</div>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>E. Shirene Willes</u>			TITLE: <u>Pat Atty</u>								
SIGNATURE: <u>E. Shirene Willes</u>			PHONE: <u>272-3230</u>								
OFFICE: <u>Office of Patents</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>			DATE: <u>7/8/05</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**